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Fill	in this information to identify your case:		
Del	otor 1 Monty Kirk Wilson First Name Middle Name Last Name		
Del	First Name Middle Name Last Name otor 2 Loria Lynn Wilson		
(Spc	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF ARKANSAS		
100000000	se numberown)	-	t if this is an ded filing
Of	ficial Form 106Sum		
	mmary of Your Assets and Liabilities and Certain Statistical Information		12/15
info	is complete and accurate as possible. If two married people are filing together, both are equally responsible f rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	or supplyir ed schedu	ig correct les after you file
Par	Summarize Your Assets		
		Your a Value o	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	218,550.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	25,354.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	243,904.00
Par	t2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	223,990.23
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	184,650.67
	Your total liabilities	\$	408,640.90
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	716.54
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,030.49
Par		Ψ	0,000.10
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your content of	ur other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s box and s	ubmit this form to
Offi	cial Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information	ļ	page 1 of 2

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Debtor 2	Loria Lynn Wilson	Case number (if known)		
	n the <i>Statement of Your Current Monthly Income</i> : Copy your total curre A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	ent monthly income from Official Form	\$	1,674.34

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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e Name Last Name e Name Last Name DISTRICT OF ARKANSAS an asset only once. If an asset fits in more than o		☐ Check if this is an amended filing
e Name Last Name DISTRICT OF ARKANSAS		
e Name Last Name DISTRICT OF ARKANSAS		
DISTRICT OF ARKANSAS		
an asset only once. If an asset fits in more than o		
an asset only once. If an asset fits in more than o		
an asset only once. If an asset fits in more than o		
an asset only once. If an asset fits in more than o		12/15
le. If two married people are filing together, both a heet to this form. On the top of any additional pag ther Real Estate You Own or Have an Interest In		
any residence, building, land, or similar property?		
What is the property? Check all that apply Single-family home Duplex or multi-unit building		
Condominium or cooperative		claims or exemptions. Put red claims on Schedule D: nims Secured by Property.
Condominium or cooperative Manufactured or mobile home Land		ed claims on Schedule D:
Condominium or cooperative Manufactured or mobile home Land Investment property	Creditors Who Have Cla	ed claims on Schedule D: aims Secured by Property. Current value of the
Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property? \$218,550.00 Describe the nature of	ced claims on Schedule D: chims Secured by Property. Current value of the portion you own? \$218,550.00 your ownership interest nancy by the entireties, o
Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current value of the entire property? \$218,550.00 Describe the nature of (such as fee simple, te	ced claims on Schedule D: chims Secured by Property. Current value of the portion you own? \$218,550.00 your ownership interest nancy by the entireties, o
		any residence, building, land, or similar property?

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debtor 1 Monty Kirk Wilson Debtor 2 Loria Lynn Wilson Case nur					ase number (if known)	
. Car	s, vans,	trucks, tractors,	sport utility ve	hicles, motorcycles		
	10					
Y	'es					
0.4	Malaas	Dodge		Will be a second of the second	Do not deduct secured cl	aims or exemptions. Put
3.1	Make: Model:	Grand Carava	an .	Who has an interest in the property? Check one Debtor 1 only	the amount of any secure	d claims on Schedule D:
	Year:	2016	<u> </u>	Control of the Contro	Creditors Who Have Clai	ms Securea by Property.
		nate mileage:	52,383	■ Debtor 2 only □ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		formation:	02,000	☐ At least one of the debtors and another	citine property:	portion you own:
				— At least one of the desicle and another		
				☐ Check if this is community property (see instructions)	\$12,380.00	\$12,380.00
3.2	Make:	Ford		Who has an interest in the property? Check one	Do not deduct secured cl	
	Model:	E150 Cargo V	/an	■ Debtor 1 only	the amount of any secure Creditors Who Have Claim	
	Year:	2002	()	Debtor 2 only	Current value of the	Current value of the
	Approxin	nate mileage:	200,000	☐ Debtor 1 and Debtor 2 only	entire property?	Current value of the portion you own?
	Other inf	ormation:		☐ At least one of the debtors and another		
					¢2.200.00	40.000.00
				☐ Check if this is community property (see instructions)	\$2,300.00	\$2,300.00
				n for all of your entries from Part 2, including a hat number here		\$14,680.00
		be Your Personal ar		erns erest in any of the following items?		O
				erest in any of the following items?	}	Current value of the cortion you own? Do not deduct secured claims or exemptions.
	amples:	goods and furnis Major appliances,		china, kitchenware		
	Yes. De	scribe				
		Liv	ring Room Fu	rniture		\$500.00
		Ма	ster Bedroon	n Furniture		\$1,200.00
		Gu	est Bedroom	Furniture		\$400.00
		Kit	chen applian	ces and kitchware		\$750.00
		W	sher/Dryer			\$350.00
		VVa	isiiei/Di yei			φ33U.UU

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Debtor 1 Monty Kirk Wilson Debtor 2 Loria Lynn Wilson Case number (if known)	
(4) Storage Cabinets	\$225.00
Patio Furniture	\$100.00
 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collecting including cell phones, cameras, media players, games □ No ■ Yes. Describe 	tions; electronic devices
(3) TVs	\$450.00
(2) Computers	\$600.00
IPad	\$150.00
Stereo with surround sound	\$150.00
DVD player	\$30.00
Sony Handycam	\$50.00
 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or be other collections, memorabilia, collectibles No Yes. Describe 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and ken musical instruments No Yes. Describe Treadmill 	
Elliptical Trainer	¢450.00
Elliptical Trainer	\$150.00
Bowflex	\$200.00
 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No ■ Yes. Describe 	
Baretta 9mm	\$175.00

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Debtor 1 Debtor 2	Monty Kirk Wilson Loria Lynn Wilson Case number (if know	vn)
	Compound Bow and equipment	\$100.00
	Compound now and equipment	Ψ100.00
	Rossi 44 mag Rifle	\$100.00
☐ No	bs bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Clothes	\$400.00
☐ No	y oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gem Describe	s, gold, silver
	Wedding rings	\$250.00
	Rings/Bracelets/Watches	\$400.00
	Earrings	\$125.00
	Necklace	\$200.00
Exam ☐ No	orm animals bles: Dogs, cats, birds, horses Describe	
	2 cats, 1 dog	\$0.00
■ No □ Yes.	her personal and household items you did not already list, including any health aids you did not list Give specific information	
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached art 3. Write that number here	\$7,180.00
	scribe Your Financial Assets	
-	vn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	oles: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pe	etition
	Cash	\$10.00

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Debtor Debtor			Kirk Wilso ynn Wilso				Case number (if known)	
							Cash		\$15.00
	amp	its of mor ples: Chec institu	king, savings	, or other fina have multiple	ncial accounts; accounts with t	certificates of deposit the same institution, li	; shares in credit unions, bro st each.	okerage houses, an	d other similar
<u></u>						Institution name:			
			17.	1. Checkir	ng	Regions Bank			\$0.00
			17.	2. Checkir	ng	First Security Ba	nk		\$118.00
Exa ■ N	amp o		funds, inves			ge firms, money marke	et accounts		
	nt v	ublicly tra enture	ded stock a	nd interests i	n incorporated	d and unincorporate	d businesses, including ar	n interest in an LL	C, partnership, and
		Give spec		on about then Name of entity			% of ownersh	ip:	
		٠			nc. n 50% owner on 50% owne		100%	%	\$1.00
Ne No. ■ N	gotia n-ne lo	able instru egotiable i	uments includinstruments a	le personal ch	ecks, cashiers' cannot transfer	e and non-negotiable checks, promissory r to someone by signin	otes, and money orders.		
			ension acco ests in IRA, E		401(k), 403(b),	, thrift savings accoun	ts, or other pension or profit	-sharing plans	
■ N	1550	List each	account sepa Тур	rately. be of account:		Institution name:			
You Exa	ur sl amp	hare of all		osits you have			vice or use from a company , water), telecommunications	s companies, or oth	ners
■ N						Institution name or in	ndividual:		
23. A nr		ies (A con	tract for a pe	riodic paymer	it of money to y	ou, either for life or fo	r a number of years)		
	0.00		Issuer n	ame and desc	cription.				
	J.S.C			a, in an acco o), and 529(b)		ed ABLE program, o	r under a qualified state tu	ition program.	
_	_		Institutio	n name and c	lescription. Sep	parately file the record	s of any interests.11 U.S.C.	§ 521(c):	
25. Tru :		equitable	e or future ir	nterests in pr	operty (other t	han anything listed	in line 1), and rights or po	wers exercisable f	for your benefit

Official Form 106A/B

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	ebtor 1 ebtor 2	Monty Kirk Wils Loria Lynn Wils			Case number (ii	f known)
	☐ Yes.	Give specific informa	ation about them			
26	Examp			ts, and other intellectua roceeds from royalties and		
	■ No □ Yes.	Give specific informa	ation about them			
27.	. Licens Examµ ■ No	ses, franchises, and ples: Building permits	other general intar , exclusive licenses	ngibles , cooperative association	holdings, liquor licenses, profession	al licenses
		Give specific informa	ation about them			
M	oney or	property owed to yo	ou?			Current value of the portion you own? Do not deduct secured
						claims or exemptions.
28.	. Tax ref ■ No	funds owed to you				
	☐ Yes.	Give specific informa	tion about them, inc	cluding whether you alread	dy filed the returns and the tax years	······
29.	Examp ■ No	support oles: Past due or lump Give specific informa		usal support, child support	t, maintenance, divorce settlement, l	property settlement
30.	Exam _p ■ No	amounts someone on bles: Unpaid wages, on benefits; unpaid	lisability insurance p loans you made to	payments, disability benef someone else	its, sick pay, vacation pay, workers	compensation, Social Security
31.		sts in insurance police below the street in insurance police below the street in the s		ealth savings account (H	SA); credit, homeowner's, or renter's	s insurance
	Yes.	Name the insurance	company of each po Company name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
			American Gene Insurance	eral Life Term Life	Loria Wilson	\$0.00
			American Gene Insurance	eral Life Term Life	Monty Wilson	\$0.00
32.	If you a someo	terest in property that are the beneficiary of one has died. Give specific informa	a living trust, expec	someone who has died t proceeds from a life insu	urance policy, or are currently entitle	d to receive property because
	Examp ■ No	s against third partie bles: Accidents, emplo Describe each claim	oyment disputes, ins	you have filed a lawsuit of surance claims, or rights to	or made a demand for payment o sue	
34.	Other o	contingent and unliq	juidated claims of	every nature, including	counterclaims of the debtor and r	ights to set off claims
	☐ Yes.	Describe each claim				

Official Form 106A/B

Schedule A/B: Property

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	otor 1 otor 2	Monty Kirk Wilson Loria Lynn Wilson		Case number (if known)	
35.	Any fin	inancial assets you did not already list			
	No				
E	☐ Yes.	. Give specific information			
36.		the dollar value of all of your entries from Part 4, including any entrie Part 4. Write that number here			\$144.00
Part	t 5: Des	escribe Any Business-Related Property You Own or Have an Interest In. List ar	y real es	tate in Part 1.	
37. [Do you o	own or have any legal or equitable interest in any business-related property?			
	No. Go	So to Part 6.			
	Yes. G	Go to line 38.			
Part		escribe Any Farm- and Commercial Fishing-Related Property You Own or Have you own or have an interest in farmland, list it in Part 1.	an Intere	est In.	
46.	Do you	ou own or have any legal or equitable interest in any farm- or commer	ial fishi	ng-related property?	
	No.	o. Go to Part 7.			
	☐ Yes.	s. Go to line 47.			
Part	t 7:	Describe All Property You Own or Have an Interest in That You Did Not List	Above		
53.	Do you	u have other property of any kind you did not already list?			
	Examp	nples: Season tickets, country club membership			
	□ No				
	Yes.	. Give specific information			
		Lawn Mower			\$300.00
					1
		Swimming pool accessories (10 years old	- pum	ps, filters, etc.	\$50.00
		Water Treatment System - purchase price	\$7,174	.00	Unknown
		Morgan Portable Building			\$3,000.00
54.	Add t	the dollar value of all of your entries from Part 7. Write that number h	ere		\$3,350.00
Part	t 8:	List the Totals of Each Part of this Form			
55	Part 1	1: Total real estate, line 2			\$218,550.00
56.			80.00		φ210,330.00
57.			80.00		
			44.00		
59.		5: Total business-related property, line 45	\$0.00		
60.		6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54 + \$3,	350.00		
62.	Total	al personal property. Add lines 56 through 61 \$25,	354.00	Copy personal property	total \$25,354.00
63.	Total	al of all property on Schedule A/B. Add line 55 + line 62			\$243,904.00

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Fill in this infor	mation to identify your	case:			
Debtor 1	Monty Kirk Wilso	n			
	First Name	Middle Name	Last Name		
Debtor 2	Loria Lynn Wilso	n			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	OF ARKANSAS		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	art 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, ever	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	the value from Check only one box for each exemption.		Specific laws that allow exemption
		Copy the value from Schedule A/B			
	2002 Ford E150 Cargo Van 200,000 miles	\$2,300.00		\$2,300.00	11 U.S.C. § 522(d)(2)
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
	Living Room Furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
	Line nom Schedule AVD. V.1			100% of fair market value, up to any applicable statutory limit	
	Master Bedroom Furniture Line from Schedule A/B: 6.2	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(3)
	Line IIoiii Schedule AVB. V.2			100% of fair market value, up to any applicable statutory limit	
	Guest Bedroom Furniture Line from Schedule A/B: 6.3	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)
	Line Irom Schedule AVB. 0.3			100% of fair market value, up to any applicable statutory limit	
	Kitchen appliances and kitchware	\$750.00		\$750.00	11 U.S.C. § 522(d)(3)
	Eine nom ouredure AVD. V.4			100% of fair market value, up to any applicable statutory limit	

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ebtor 2 Loria Lynn Wilson		 Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	ount of the exemption you claim ack only one box for each exemption.	Specific laws that allow exemption
Washer/Dryer Line from Schedule A/B: 6.5	\$350.00	\$350.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
(4) Storage Cabinets Line from Schedule A/B: 6.6	\$225.00	\$225.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
Patio Furniture Line from Schedule A/B: 6.7	\$100.00	\$100.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
(3) TVs Line from Schedule A/B: 7.1	\$450.00	\$450.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
(2) Computers Line from Schedule A/B: 7.2	\$600.00	\$600.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
IPad Line from Schedule A/B: 7.3	\$150.00	\$150.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
Stereo with surround sound Line from Schedule A/B: 7.4	\$150.00	\$150.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
DVD player Line from Schedule A/B: 7.5	\$30.00	\$30.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
Sony Handycam Line from Schedule A/B: 7.6	\$50.00	\$50.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
Treadmill Line from Schedule A/B: 9.1	\$100.00	\$100.00	11 U.S.C. § 522(d)(5)
		100% of fair market value, up to any applicable statutory limit	
Elliptical Trainer Line from Schedule A/B: 9.2	\$150.00	\$150.00	11 U.S.C. § 522(d)(5)
a second of street of all the		100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Debtor 2	Monty Kirk Wilson Loria Lynn Wilson		Case number (if known)	
	description of the property and line on edule A/B that lists this property	Current value of the portion you own Copy the value from	ount of the exemption you claim	Specific laws that allow exemption
	vflex from Schedule A/B: 9.3	Schedule A/B \$200.00	\$200.00	11 U.S.C. § 522(d)(5)
Line	Ironi Scriedule A/B. 9.3		100% of fair market value, up to any applicable statutory limit	
	etta 9mm from Schedule A/B: 10.1	\$175.00	 \$175.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
	n holster from Schedule A/B: 10.2	\$25.00	\$25.00	11 U.S.C. § 522(d)(5)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		100% of fair market value, up to any applicable statutory limit	
	mpound Bow and equipment from Schedule A/B: 10.3	\$100.00	\$100.00	11 U.S.C. § 522(d)(5)
Line	Hom Sundana 772. Tele		100% of fair market value, up to any applicable statutory limit	
	ssi 44 mag Rifle from Schedule A/B: 10.4	\$100.00	\$100.00	11 U.S.C. § 522(d)(5)
LITTE	Holli Galledale PAB. 10.4		100% of fair market value, up to any applicable statutory limit	
	thes from Schedule A/B; 11.1	\$400.00	\$400.00	11 U.S.C. § 522(d)(3)
Line	TION CONSUME TYPE.		100% of fair market value, up to any applicable statutory limit	
	dding rings from Schedule A/B: 12.1	\$250.00	\$250.00	11 U.S.C. § 522(d)(4)
LINC	Holli Golladdie 745. 12.1		100% of fair market value, up to any applicable statutory limit	
	gs/Bracelets/Watches from Schedule A/B: 12.2	\$400.00	\$400.00	11 U.S.C. § 522(d)(4)
Line	TOTAL CONSTITUTE OF THE CONTRACT OF THE CONTRA		100% of fair market value, up to any applicable statutory limit	
	rings from Schedule A/B: 12.3	\$125.00	\$125.00	11 U.S.C. § 522(d)(4)
Line	Total Constant (VE). (210		100% of fair market value, up to any applicable statutory limit	
	klace from Schedule A/B: 12.4	\$200.00	\$200.00	11 U.S.C. § 522(d)(4)
LII16	TION CONGULO PVD. 14.T		100% of fair market value, up to any applicable statutory limit	
Cas	sh from <i>Schedule A/B</i> : 16.1	\$10.00	\$10.00	11 U.S.C. § 522(d)(5)
LiiiG	Solidaro 785. 1911		100% of fair market value, up to any applicable statutory limit	

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or 2 Loria Lynn Wilson			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Cash Line from <i>Schedule A/B</i> : 16.2	\$15.00		\$15.00	11 U.S.C. § 522(d)(5)
Line Iron Schedule A.B. 19.2			100% of fair market value, up to any applicable statutory limit	
Checking: First Security Bank Line from Schedule A/B: 17.2	\$118.00		\$118.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
American General Life Term Life	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Beneficiary: Loria Wilson Line from <i>Schedule A/B</i> : 31.1			100% of fair market value, up to any applicable statutory limit	
Lawn Mower Line from Schedule A/B: 53.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(5)
Life Irom Schedule A.B. 33.1			100% of fair market value, up to any applicable statutory limit	
Swimming pool accessories (10 years old) - pumps, filters, etc.	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 53.2			100% of fair market value, up to any applicable statutory limit	
Water Treatment System - purchase price \$7,174.00	Unknown			11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 53.3			100% of fair market value, up to any applicable statutory limit	
Morgan Portable Building Line from Schedule A/B: 53.4	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(5)
and nome derivatives.			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
No		ener u		
☐ Yes. Did you acquire the property cover☐ No	ed by the exemption w	ithin 1	,215 days before you filed this case	?
□ No □ Yes				

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						•	
Fill in	n this informa	tion to identify you	ır case:				
Debte	or 1	Monty Kirk Wils	on				
		First Name	Middle Name	Last Name		-	
Debte		Loria Lynn Wils		T See N			
(Spous	se if, filing)	First Name	Middle Name	Last Name			
Unite	d States Bank	ruptcy Court for the:	EASTERN DISTRIC	T OF ARKANSAS			
Case	number						
(if know						☐ Check	if this is an
						amend	led filing
Offi:	oial Earm	106D					
	cial Form						
Sch	nedule D): Creditors	Who Have C	laims Secure	ed by Propert	ty	12/15
is need	complete and a ded, copy the A er (if known).	ccurate as possible. additional Page, fill it d	If two married people are to out, number the entries, a	filing together, both are end attach it to this form. (equally responsible for s On the top of any addition	upplying correct informa onal pages, write your na	tion. If more space me and case
1. Do a	any creditors ha	ave claims secured by	your property?				
	No. Check th	nis box and submit t	nis form to the court with	your other schedules.	You have nothing else	to report on this form.	
7	Yes. Fill in a	Il of the information	below.				
Part	1: List All S	Secured Claims					
			more than one secured clain	n. list the creditor separate	Column A	Column B	Column C
for ea	ch claim. If more	e than one creditor has	a particular claim, list the o	ther creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much	as possible, list	the claims in alphabeti	cal order according to the cr	editor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
	Ally		Describe the property th		\$18,559.79	\$12,380.00	\$6,179.79
	Creditor's Name		2016 Dodge Grand miles	Caravan 52,383			
	P.O. Box 38	80902					
	Minneapolis		As of the date you file, the apply.	ne claim is: Check all that			
	55438-0902		Contingent				
-	Number, Street, Ci	ity, State & Zip Code	☐ Unliquidated				
			Disputed	× 4			
	owes the debt	? Check one.	Nature of lien. Check all				
-	ebtor 1 only		An agreement you made car loan)	de (such as mortgage or se	ecured		
	ebtor 2 only ebtor 1 and Debt	or 2 only	☐ Statutory lien (such as	Ann line ann de mile line			
_		or 2 only debtors and another	☐ Statutory lien (such as	Telephon (Editoria Control Managero Decoration (Managero Managero)			
_	neck if this clair		Other (including a right				
	ommunity debt		— Guidi (indiading a right				
		December					
Date of	debt was incurr		Last 4 digits of ac	count number 4927			
		A	-				
2.2	Amerifirst H	łome					
	Improveme	nt	Describe the property th	THE PURCHASING W. O. LANCOOK, MICHAEL SHOWS AND THE PROPERTY OF THE PURCHASING PROPERTY OF THE PURCHAS	\$25,852.44	Unknown	Unknown
	Creditor's Name		Inground swimmin				
			needs to be replace cracked, in bad sha				
	PO Box 204	.0	As of the date you file, the				
	Omaha, NE		apply. Contingent				
		ity, State & Zip Code	☐ Unliquidated				
			☐ Disputed				
_	owes the debt	? Check one.	Nature of lien. Check all	that apply.			
	☐ Debtor 1 only ☐ An agreement you made (such as mortgage or secured						
_	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien)						
-	ebtor 1 and Debto						
	least one of the neck if this clain	debtors and another	☐ Judgment lien from a la☐ Other (including a right				
	ommunity debt		— Other (including a right	. 10 011561)			

Official Form 106D

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Debtor 1 Monty Kirk Wilson		Case number (if known)		
First Name Middle N	ame Last Name			
Debtor 2 Loria Lynn Wilson First Name Middle N.	ame Last Name			
First Name Middle N.	arrie Last Name			
Date debt was incurred 2005	Last 4 digits of account number	0740		
2.3 Mr. Cooper	Describe the property that secures the cl		\$218,550.00	\$0.00
Creditor's Name	335 Glenn Hill Alexander, AR 72 Saline County	002		
PO Box 650783 Dallas, TX 75265	As of the date you file, the claim is: Check apply. ☐ Contingent	all that		
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortg car loan)	age or secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	rtgage		
Date debt was incurred November 2014	Last 4 digits of account number	2490		
2.4 Preferred Credit, Inc.	Describe the property that secures the cl	aim: \$7,174.00	Unknown	Unknown
Creditor's Name	Water Treatment System - purch price \$7,174.00	nase	-	
PO Box 1970 Saint Cloud, MN 56302	As of the date you file, the claim is: Check apply. Contingent	all that		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	VO.559 196			
Debtor 2 only	 An agreement you made (such as mortg car loan) 	age or secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	c's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred November 2018	Last 4 digits of account number	0916		
	olumn A on this page. Write that number h	ere: \$223,99	0.23	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.	\$223,99	0.23	
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	4.10 bi	(11100 0000.11	Thea. Corotris Entere	.d. 00/01/10 14:11.	00 1 age 10 01 01	
Fill	n this informa	tion to identify your case:				
Deb	tor 1	Monty Kirk Wilson				
			Middle Name Last Name			
Deb	tor 2	Loria Lynn Wilson				
(Spot	se if, filing)	First Name	Middle Name Last Name			
Unit	ed States Bank	ruptcy Court for the: EAST	ERN DISTRICT OF ARKANSAS			
Cas	e number					
(if kno	own)				☐ Check if this is an	
					amended filing	
~ ~ ~		100=1=				
	cial Form					
Scl	nedule E/F	: Creditors Who H	lave Unsecured Claims		12/15	
any e Sche Sche left. <i>A</i>	xecutory contractule G: Executor dule D: Creditors	cts or unexpired leases that coury Contracts and Unexpired Lea Who Have Claims Secured by Juation Page to this page. If you	for creditors with PRIORITY claims and ald result in a claim. Also list executory ses (Official Form 106G). Do not include Property. If more space is needed, copy have no information to report in a Part,	contracts on Schedule A/B: Po any creditors with partially se the Part you need, fill it out, n	roperty (Official Form 106A/B) and on ecured claims that are listed in umber the entries in the boxes on the	
Part	1: List All o	of Your PRIORITY Unsecure	d Claims		*	
1.	Do any creditors	have priority unsecured claims	against you?			
	No. Go to Part	2.				
	☐ Yes.					
Part	2: List All o	of Your NONPRIORITY Unse	cured Claims			
3.	Oo any creditors	have nonpriority unsecured cla	aims against you?			-
	_					
	→ No. You have	nothing to report in this part. Subn	nit this form to the court with your other sch	edules.		
	Yes.					
1	unsecured claim, I	list the creditor separately for each	the alphabetical order of the creditor who n claim. For each claim listed, identify what ner creditors in Part 3.If you have more thar	type of claim it is. Do not list clai	ms already included in Part 1. If more	
					Total claim	
4.1	ASSN's M	lember Benefit	Last 4 digits of account number	1659	\$303.00	
1 200 0.00		reditor's Name		1000	Ψ303.00	-0
	c/o TSYS		When was the debt incurred?	December 2018		
		port Way, Ste. 100				
		Id, CO 80021 et City State Zlp Code	As of the data you file the claim	io. Obeste all that and		
		d the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	TARACTURA AND TRACTOR OF					
	☐ Debtor 1 o	•	☐ Contingent			
	Debtor 2	•	☐ Unliquidated			
	☐ Debtor 1 a	and Debtor 2 only	☐ Disputed			
	At least or	ne of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if	this claim is for a community	☐ Student loans			
	debt	-	Obligations arising out of a sepa	aration agreement or divorce tha	it you did not	
	_	subject to offset?	report as priority claims			
	■ No		Debts to pension or profit-sharing	ng plans, and other similar debts		
	☐ Yes		Other. Specify Blind Pro,	Inc. debt - Credit Card F	Processor	
			* * -			

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Debtor 1 Debtor 2	Monty Kirk Wilson Loria Lynn Wilson		Case number (if known)	·	
and the same of th	AT&T	Last 4 digits of account number	3595	\$321.63	
F	Ionpriority Creditor's Name O Box 105414	When was the debt incurred?	December 2018		
N	Atlanta, GA 30398-5414 Jumber Street City State Zlp Code Vho incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
_	☐ Check if this claim is for a community	☐ Student loans			
d	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
[Yes	Other. Specify Blind Pro d	ebt - unpaid phone bill		
	Bank of America	Last 4 digits of account number	7441	\$4,481.34	
F	lonpriority Creditor's Name PO Box 851001 Dallas, TX 75285-1001	When was the debt incurred?	2005		
N	lumber Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured			
	Check if this claim is for a community	☐ Student loans			
	ebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	No	Debts to pension or profit-sharing			
	Yes	Other. Specify Credit Card	<u> </u>		
	Bank of America	Last 4 digits of account number	7083	\$2,786.38	
F	PO Box 851001 Pallas, TX 75285-1001	When was the debt incurred?	2004		
N	lumber Street City State Zlp Code Vho incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community				
d	ebt		ration agreement or divorce that you did not		
	s the claim subject to offset?	report as priority claims			
	No Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card			

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	or 1 Monty Kirk Wilson Loria Lynn Wilson	Case number (if known)			
4.5	Barbara and James Wafford	Last 4 digits of account number	\$500.00		
	Nonpriority Creditor's Name 7903 Marche Lateral Rd. North Little Rock, AR 72118	When was the debt incurred? December 2018			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed The ANNUARION OF THE PROPERTY OF T			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Down payment to Blind Pro, Inc.			
		— Other. Specify			
4.6	Best Buy Nonpriority Creditor's Name	Last 4 digits of account number 3515	\$1,659.57		
	PO Box 9001007	When was the debt incurred? 1998			
	Louisville, KY 40290-1007 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	no of the date yearing the staining. Shook all that apply			
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	□ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Credit Card			
4.7	Capital One	Last 4 digits of account number 9508	\$5,063.34		
	Nonpriority Creditor's Name PO Box 60599	When wen the debt incorred?			
	City of Industry, CA 91716 Number Street City State Zlp Code	When was the debt incurred? 2004 As of the date you file, the claim is: Check all that apply	*		
	Who incurred the debt? Check one.	,			
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify Credit Card			

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Debto Debto	r 1 Monty Kirk Wilson r 2 Loria Lynn Wilson	Case number (if known)	
4.8	Capital One	Last 4 digits of account number 1060	\$2,500.72
	Nonpriority Creditor's Name PO Box 60599	When was the debt incurred? 2004	,
	City of Industry, CA 91716 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce the report as priority claims	
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar deb ☐ Other. Specify Credit Card	S
4.9	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number 7591	\$16,778.35
	PO Box 6294 Carol Stream, IL 60197-6294	When was the debt incurred? 2001	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce the report as priority claims	
	■ No □ Yes	 □ Debts to pension or profit-sharing plans, and other similar deb ■ Other. Specify Credit Card	S
4.1 0	Citi Business Card Nonpriority Creditor's Name	Last 4 digits of account number 5029	\$5,816.81
	PO Box 9001037 Louisville, KY 40290-1037	When was the debt incurred? 2000	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent	
	☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce the report as priority claims	at you did not
	No	Debts to pension or profit-sharing plans, and other similar deb	ss
	Yes	Other. Specify Credit Card - Blind Pro, Inc.	

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	Monty Kirk Wilson Loria Lynn Wilson		Case number (if known)	
4.1	Citi Cards	Last 4 digits of account number	6177	\$25,376.06
	Nonpriority Creditor's Name PO Box 6004 Sioux Falls, SD 57117	When was the debt incurred?	2005	
1	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.	
	☐ At least one of the debtors and another	Student loans	d Claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
Į	s the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not	
	No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
1	Yes	Other. Specify Credit Card	1	
4.1	Dennis and David Clark	Last 4 digits of account number		\$4,590.00
!	Nonpriority Creditor's Name 520 Colonial Dr.	When was the debt incurred?		,
1	Bryant, AR 72022 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
92	Debtor 1 only	☐ Contingent		
92	Debtor 2 only	☐ Unliquidated		
1	Debtor 1 and Debtor 2 only	Disputed		
100	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
(debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	ă
1	No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
j	Yes	Other. Specify Down payn	nent to Blind Pro, Inc.	
4.1 3	Direct TV	Last 4 digits of account number	2529	\$385.90
ı	Nonpriority Creditor's Name PO Box 105261	When was the debt incurred?	November 2018	
1	Atlanta, GA 30348-5261 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a report as priority claims		pration agreement or diverse that you did not	
			arising out of a separation agreement or divorce that you did not by claims	
j	■ No □ Debts to pension or profit-sha		g plans, and other similar debts	
ĺ	☐ Yes	■ Other. Specify Unpaid sate	ellite bill	

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	Loria Lynn Wilson		Case number (if known)			
4.1	Exxon Mobil	Last 4 digits of account number	6812	\$1,880.00		
	Nonpriority Creditor's Name PO Box 78001	When was the debt incurred?	1999			
	Phoenix, AZ 85062-8001 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent				
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
	At least one of the debtors and another Check if this claim is for a community	Type of NONPRIORITY unsecured Student loans				
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card				
4.1 5	Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	2967	\$7,599.92		
	PO Box 9001010 Louisville, KY 40290	When was the debt incurred?	2004			
	Number Street City State Zlp Code Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only ☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	nsecured claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims				
	■ No	☐ Debts to pension or profit-sharin	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Credit Card	1			
4.1	Home Depot	Last 4 digits of account number	8434	\$5,681.15		
	Nonpriority Creditor's Name PO Box 9001010 Louisville, KY 40290	When was the debt incurred?	2004			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No		on or profit-sharing plans, and other similar debts			
	□Yes	Other. Specify Credit Card				
		- Other, Specify Stoute Out C				

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	1 Monty Kirk Wilson 2 Loria Lynn Wilson		Case number (if known)	
	Hunter Douglas Fabrication	Last 4 digits of account number	1219	\$20,746.38
	Nonpriority Creditor's Name One Hunter Douglas Dr.	When was the debt incurred?	August 2018	
-	Cumberland, MD 21502 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No □ Yes	Debts to pension or profit-sharin		
	Yes	Other. Specify Blind Pro V	rendor - billios for resale	
	J.W. Henderson, Jr.	Last 4 digits of account number		\$2,200.00
	Nonpriority Creditor's Name 1622 Mary Lane Alexander, AR 72002	When was the debt incurred?	December 2018	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Down payn	nent to Blind Pro, Inc.	
0	Janis Wylie	Last 4 digits of account number		\$276.72
	Nonpriority Creditor's Name 26322 Kanis Rd.	When was the debt incurred?	December 2018	
_	Little Rock, AR 72223 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Down payn	nent to Blind Pro, Inc.	

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Debte Debte	or 1 Monty Kirk Wilson Loria Lynn Wilson	Case number (if known)	
4.2	Kim Whittaker	Last 4 digits of account number	\$513.98
0	Nonpriority Creditor's Name 6009 Kamden Cove	When was the debt incurred? December 2018	
	Alexander, AR 72002 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	□ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Down payment to Blind Pro, Inc.	
4.2	Kohl's	Last 4 digits of account number 681	\$1,838.22
	Nonpriority Creditor's Name PO Box 2983 Milwaukee, WI 53201-2983	When was the debt incurred? 2006	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Credit Card	
4.2	Mike O'Brien	Last 4 digits of account number	\$144.32
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ144.02
	3301 Foxcroft Rd. Little Rock, AR 72227	When was the debt incurred? December 2018	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Поль	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	H
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Down payment to Blind Pro, Inc.	

4:19-bk-11139 Doc#: 1-1 Filed: 03/01/19 Entered: 03/01/19 14:11:33 Page 24 of 37 Debtor 1 Monty Kirk Wilson Debtor 2 Loria Lynn Wilson Case number (if known) 4.2 Paula Johnson 3 Last 4 digits of account number \$220.00 Nonpriority Creditor's Name 124 Belles Fleur When was the debt incurred? December 2018 Little Rock, AR 72223 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only Disputed At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Check if this claim is for a community deht Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Down payment to Blind Pro, Inc. 4.2 Regions Bank Last 4 digits of account number \$526.00 Nonpriority Creditor's Name 1702 N. Reynolds Rd. When was the debt incurred? Bryant, AR 72022 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Check if this claim is for a community ☐ Student loans debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims No. \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Checking Account 4.2 5 Regions Consumer Bankcard 8254 Last 4 digits of account number \$7,314.33 Nonpriority Creditor's Name PO Box 2224 When was the debt incurred? 2004 Birmingham, AL 35246-3023 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed

■ No

☐ Yes

■ Other. Specify Credit Card

Type of NONPRIORITY unsecured claim:

Obligations arising out of a separation agreement or divorce that you did not

 \square Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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Debtor 1 Debtor 2	Monty Kirk Wilson Loria Lynn Wilson		Case number (if known)					
•	Robin and Angie Mitchell	Last 4 digits of account number	\$1,500.00					
)	Nonpriority Creditor's Name 6752 Hilo Benton, AR 72019	When was the debt incurred?	was the debt incurred? December 2018					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-shari						
	Yes	Other. Specify Down payer	ment to Blind Pro, Inc.					
4.2	Shell	Last 4 digits of account number	1002	\$1,496.52				
	Nonpriority Creditor's Name PO Box 6406	When was the debt incurred?	2001					
	Sioux Falls, SD 57117-6406 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply					
	Who incurred the debt? Check one.	,	The second and sepper,					
	Debtor 1 only	☐ Contingent						
	■ Debtor 2 only □ Unliquidated							
	Debtor 1 and Debtor 2 only							
	☐ At least one of the debtors and another	ed claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	\square Obligations arising out of a sep report as priority claims						
	■ No	Debts to pension or profit-shari						
	Yes	Other. Specify Credit Care	d - Blind Pro, Inc.					
	Skandia Window Fashions Nonpriority Creditor's Name	Last 4 digits of account number	3304	\$3,000.00				
	PO Box 6566 Tallahassee, FL 32314-6566	When was the debt incurred?	November 2017					
7	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
1	Debtor 2 only							
	Debtor 1 and Debtor 2 only							
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts					
	☐ Yes	Other, Specify Blind Pro	Vendor - blinds for resale					

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Debtor 2 Debtor 2	Monty Kirk Wilson Loria Lynn Wilson		Case number (if known)					
	Springs Window Fashions	Last 4 digits of account number	3362	\$10,322.48				
	Nonpriority Creditor's Name 7549 Graber Rd. Middleton, WI 53562-1096	When was the debt incurred?	September 2018					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:					
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	□ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	\square Debts to pension or profit-sharin						
	Yes	Other. Specify Blind Pro V	endor - blinds for resale					
	Staples Nonpriority Creditor's Name	Last 4 digits of account number	3069	\$2,300.00				
	PO Box 78004 Phoenix, AZ 85062-8004	When was the debt incurred?	2000					
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	,						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims	ation agreement of divorce that you did not					
	■ No	Debts to pension or profit-sharin	lacktriangle Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit Card	- Blind Pro, Inc.					
	Target Card Services	Last 4 digits of account number	1835	\$2.086.25				
	Nonpriority Creditor's Name PO Box 660170	When was the debt incurred?	2004	·				
-	Dallas, TX 75266-0170 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	_						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated ☐ Disputed						
	Debtor 1 and Debtor 2 only	l alaims						
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	craim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not						
	ls the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					

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Debto	or 1 Monty Kirk Wilson Loria Lynn Wilson	Case number (if known)					
4.3	Tiffany Johnson	Last 4 digits of account number	\$140.00				
	Nonpriority Creditor's Name 5415 Union Square Benton, AR 72019	When was the debt incurred? December 2018					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Down payment to Blind Pro, Inc.					
4.3	Tiffany O'Dwyer	Last 4 digits of account number	\$233.00				
	Nonpriority Creditor's Name 98 Clervaux Dr. Little Rock, AR 72223	When was the debt incurred? December 2018	ar .				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Down payment to Blind Pro, Inc.					
4.3	Timber Blind-Metro Shade	Last 4 digits of account number 4274	\$35,077.21				
	Nonpriority Creditor's Name 800 E. Elm St. McKinney, TX 75069	When was the debt incurred? October 2018					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other Specify Blind Pro Vendor - blinds for resale					

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Tracyc Easterly Cadding's Name All March (1998) Cadding's Name All March (1998) Cadding's Name All March (1998) Cadding's Name	Debtor Debtor	r 1 Monty Kirk Wilson T2 Loria Lynn Wilson			
Anomatically Credition's Name 40 Marratically Credition's Name 40 Marratically Credition's Name 40 Marratically States 2 pc doe Who incurred the debt? Check one.	4.3	Tracye Easterly	Last 4 digits of account number		\$2.500.00
Hot Springs Village, AR 71909 Number Street City State 2 Dode Number Street City State 2 Dode Number Street City State 2 Dode Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 3 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 3 only 1 only	5	Nonpriority Creditor's Name			7-,700.00
Number Street City State 2 (D Code Who incurred the debt/2 Check one.			When was the debt incurred?	December 2018	
Debtor 1 and Debtor 2 only		Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Debtor 2 only			no or the date you me, the claim	on one all that apply	
Debtor 2 only		☐ Debtor 1 only	☐ Contingent		
Debtor 1 and Debtor 2 only			_		
At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim subject to offset? Check one. Check offset? Check one. Check offset? Check		_			
Check if this claim subject to offset? Contingent Check in this claim subject to offset? Contingent Check if this claim subject to offset? Check one. Check if this claim subject to offset? Contingent Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Check if this claim subject to offset? Check one. Ch		STOCKED CONTROL OF STOCKED VARIABLE CONTROL OF STOCKED CONTROL OF STOC	and the second	d claim:	
State Continue C				u Ciaini.	
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts PO Box 790408 Nonpriority Creditor's Name PO Box 790408 Namber Street City State Zip Code Who incurred the debtor and another Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 spriority Creditor's Name PO Box 300 PYes Valero Last 4 digits of account number Street City State Zip Code Who incurred the debtors and another Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 a priority Claims Debtor 3 a priority Claims Debtor 4 and Debtor 2 only Debtor 3 a priority Claims Debtor 4 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 on		-		and an arrange of the state of	
US Bank Nonpriority Creditor's Name PO Box 790408 Saint Louis, Mo 63179-0408 Number Street City State 2 rolly Debtor 1 and Debtor 2 only No Pyes Valero Nonpriority Creditor's Name PO Box 3004 Not the debt's Check one. Debtor 1 and Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 4 only Debtor 5 the claim subject to offset? Debtor 5 only Debtor 5 the debt's one of the debtors and another DSRM National Bank PO Box 300 Amarillo, TX 79105-0300 Number Street City State 2/p Code Who incurred the debt's Check one. Debtor 1 only Deb			report as priority claims	aration agreement or divorce that you did not	
Last 4 digits of account number 7543 \$4,994.73 US Bank		■ No		ng plans, and other similar debts	
Nonpriority Creditor's Name PO Box 790408 Saint Louis, MO 63179-0408 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Unliquidated		Yes	Other. Specify Down payr	nent to Blind Pro, Inc.	
Nonpriority Creditor's Name PO Box 790408 Saint Louis, MO 63179-0408 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Nonpriority Creditor's Name DSRM Mattonal Bank PO Box 300 Amarillo, TX 79105-0300 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Student loans Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? 2007 2007 2007 2007 As of the date you file, the claim is: Check all that apply Wen was the debt incurred? 2007 As of the date you file, the claim is: Check all that apply Wen was the debt incurred? 2007 As of the date you file, the claim is: Check all that apply Student loans Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Student loans Debts 10 pension or profit-sharing plans, and other similar debts	4.3	IIO Deals		7540	A4004 T0
PO Box 790408 Saint Louis, MO 63179-0408 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only Debtor 2 only Debtor 3 and Debtor 4 and Debtor 3 and Debtor 4 and Debtor 4 and Debtor 4 and Debtor 5 and 9 and Debtor 4 and Debtor 4 and Debtor 5 and 9 and 1	6		Last 4 digits of account number	7 343	\$4,994.73
Saint Louis, MO 63179-0408 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 5 shee claim is for a community debt Is the claim subject to offset? Debtor 5 shee claim 5 sheet claim			When was the debt incurred?	2005	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 sharing plans, and other similar debts At least one of the debtors and another Debtor 1 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 NonPRIORITY unsecured claim: Student loans Debtor 8 only Debtor 9 NonPRIORITY unsecured claim: Debtor 9 NonPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 NonPRIORITY unsecured claim: Debtor 6 NonPRIORITY unsecured claim: Debtor 9		Saint Louis, MO 63179-0408			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other, Specify Tyes Valero Nonpriority Creditor's Name DSRM National Bank PO Box 300 Amarillo, TX 79105-0300 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Other, Specify Credit Card Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other, Specify Credit Card ### A soft he date you file, the claim is: Check all that apply ### Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims			As of the date you file, the claim	is: Check all that apply	
Debtor 2 only		POSICIONES PROPOSE REPORTE SERVICE ACTUAL POSICIONES DE PO			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Valero Last 4 digits of account number DSRM National Bank PO Box 300 Amarillo, TX 79105-0300 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Is the claim subject to offset? Debtor 3 ond of the debtors and another Debtor 4 on the debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 3 ond of the debtors and another Debtor 4 on the debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 5 on the debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 6 on the debtor 2 only Disputed Debtor 8 on the debtor 2 only Disputed Debtor 9 on the debtor 2 only Disputed Debtor 1 on the debtor 3 on the debtor 4 on the debtor 3 on the debtor 4 on the debto			☐ Contingent		
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Student loans Obligations anising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts Type of NONPRIORITY unsecured claim: Obligations anising out of a separation agreement or divorce that you did not report as priority claims Total Card Total Card Type of NONPRIORITY unsecured claim: Obligations anising out of a separation agreement or divorce that you did not report as priority claims Total Card Total Ca		Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Credit Card A.3		☐ Debtor 1 and Debtor 2 only			
debt Sthe claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card No		\square At least one of the debtors and another		d claim:	
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Other. Specify Credit Card Last 4 digits of account number 3290 \$700.00 Synd National Bank PO Box 300 Amarillo, TX 79105-0300 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Freport as priority claims Debts to pension or profit-sharing plans, and other similar debts		1-1			
Valero Specify Credit Card				aration agreement or divorce that you did not	
Valero Specify Credit Card		No.	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Nonpriority Creditor's Name DSRM National Bank PO Box 300 Amarillo, TX 79105-0300 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Last 4 digits of account number 3290 \$700.00 When was the debt incurred? 2007 As of the date you file, the claim is: Check all that apply When was the debt incurred? 2007 As of the date you file, the claim is: Check all that apply Unliquidated Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts					
Nonpriority Creditor's Name DSRM National Bank PO Box 300 Amarillo, TX 79105-0300 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Last 4 digits of account number 3290 \$700.00 When was the debt incurred? 2007 As of the date you file, the claim is: Check all that apply When was the debt incurred? 2007 As of the date you file, the claim is: Check all that apply Unliquidated Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	4.3				Management Management
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□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts		Who incurred the debt? Check one.			
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□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		Debtor 2 only	☐ Unliquidated		
☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims No		☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
debt Is the claim subject to offset? In No Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		☐ Check if this claim is for a community	☐ Student loans		
■ No □ Debts to pension or profit-sharing plans, and other similar debts		debt			
		William Co.			
☐ Yes ☐ Other. Specify Credit Card					
		☐ Yes	Other. Specify Credit Card		

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			k Wilson n Wilson		Case nu	ımber (if knowi	n)	
4.3 Vista I		262 622300	200000	Last 4 digits of account number	r			\$796.36
:	8801 Cc	rpo	litor's Name rate Square Ct. e, FL 32216	When was the debt incurred?	Janu	ary 2019		
1	Number St	treet (City State Zlp Code he debt? Check one.	As of the date you file, the claim	n is: Check	all that apply		
	Debtor			П ж				
	Debtor		•	☐ Contingent				
			•	Unliquidated				
☐ Debtor 1 and Debtor 2 only At least one of the debtors and another				☐ Disputed Type of NONPRIORITY unsecure	ed claim:			
			s claim is for a community	☐ Student loans				
(debt Is the claim subject to offset?			Obligations arising out of a sep	paration ag	reement or div	orce that you did not	
	No		,	Debts to pension or profit-shari	ing plans :	and other simil	lar dehts	
	□ Yes			Other. Specify Blind Pro				
Part 3:	List O	thers	s to Be Notified About a Debt	That You Already Listed				
is trying have m	g to colled ore than d	ct fro	m you for a debt you owe to som	out your bankruptcy, for a debt that leone else, list the original creditor i you listed in Parts 1 or 2, list the add submit this page.	in Parts 1	or 2, then list	the collection agency her	re. Similarly, if you
Name and				n which entry in Part 1 or Part 2 did yo				
	S. Elrod		Li				Priority Unsecured Claims	
	od Firm nterstat		1	I	Part 2: 0	Creditors with I	Nonpriority Unsecured Clair	ms
	AR 720							
			L	ast 4 digits of account number				
Part 4:			nounts for Each Type of Uns					
	ne amount unsecure			s. This information is for statistical	reporting	purposes onl	ly. 28 U.S.C. §159. Add the	e amounts for each
						Т	Total Claim	
	20.191	6a.	Domestic support obligations		6a.	\$	0.00	
To clai	otal ms							
from Pa		6b.	Taxes and certain other debts	you owe the government	6b.	\$	0.00	
		6c.	Claims for death or personal in	jury while you were intoxicated	6c.	\$	0.00	
		6d.	Other. Add all other priority unser	cured claims. Write that amount here.	6d.	\$	0.00	
		6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	0.00	
						J 		
		6f.	Student loans		6f.	\$	Total Claim 0.00	
	otal	week.	40.790		·=ar.	*	0.00	
clai from Pa		60	Obligations arising out of a ser	paration agreement or divorce that				
nom Fa	you did not report as priority cl				6g.	\$	0.00	
		6h.		ing plans, and other similar debts	6h.	\$	0.00	
		6i.	Other. Add all other nonpriority u here.	nsecured claims. Write that amount	6i.	\$	184,650.67	
		6j.	Total Nonpriority. Add lines 6f th	nrough 6i.	6j.	\$	184,650.67	

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						30 00 00
Fill	l in this inform	ation to identify your ca	se:			
De	btor 1	Monty Kirk Wilson	Middle Name	Last Name		
	btor 2 ouse if, filing)	Loria Lynn Wilson First Name	Middle Name	Last Name		
Un	ited States Ban	kruptcy Court for the:	EASTERN DISTRICT OF AF	RKANSAS		
	se number					Check if this is an amended filing
Of	fficial For	m 106G				
			Contracts and			12/15
info	prmation. If molitional pages, Do you have No. Check Yes. Fill in	any executory contracts this box and file this form all of the information belowly each person or compt, vehicle lease, cell pho		t out, number the entries, er schedules. You have no ses are listed on <i>Schedule</i> he contract or lease. The	and attach it to this page withing else to report on this A/B:Property (Official Foundation	ge. On the top of any s form. rm 106 A/B). ract or lease is for (for
	Person or c	ompany with whom you Name, Number, Street, City, St	have the contract or lease ate and ZIP Code	State what the cor	ntract or lease is for	
2	PO Box	ata Global Leasing : 407092 uderdale, FL 33340		Credit Card Te	erminal, expires 02/07	7/2021
2	PO Box	ata Global Leasing 407092 uderdale, FL 33340		Credit Card Te	erminal - expires 04/0	1/2019
2	PO Box	ata Global Leasing 407092 uderdale, FL 33340		Virtual Credit	Card Terminal for PC	- expires 06/01/2020

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Fill in th	nis information to identify your	case.		Spirit - M	
				12, 12, 17	
Debtor 1	Monty Kirk Wilso First Name	n Middle Name	Last Name		
Debtor 2 (Spouse if,		n Middle Name	Last Name		
United S	States Bankruptcy Court for the:	EASTERN DISTRICT	OF ARKANSAS		
Case nu	ımber				
(if known)					Check if this is an amended filing
Offici	al Form 106H				
	edule H: Your Cod	ebtors			12/15
-					12/10
people a fill it out	are filing together, both are equa	ally responsible for su boxes on the left. Atta	ebts you may have. Be as comp pplying correct information. If m ich the Additional Page to this p on.	nore space is needed, c	opy the Additional Page,
1. D	o you have any codebtors? (If y	you are filing a joint case	e, do not list either spouse as a co	debtor.	
	No				
Y	es es				
			property state or territory? (Con Puerto Rico, Texas, Washington, a		nd territories include
	No. Go to line 3.				
□ Y	es. Did your spouse, former spou	ıse, or legal equivalent l	ive with you at the time?		
in li For	ine 2 again as a codebtor only i	f that person is a guar	ur spouse as a codebtor if your antor or cosigner. Make sure yo edule G (Official Form 106G). Us	u have listed the creditor	or on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		lumn 2: The creditor to veck all schedules that ap	whom you owe the debt ply:
3.1	Blind Pro, Inc.			Sahadula D. lina	
0.1	335 Glenn Hill Dr.			Schedule D, line Schedule E/F, line	_ 4 10
	Alexander, AR 72002			Schedule G	4.10
				i Business Card	
3.2	Blind Pro, Inc.			Schedule D, line	_
	335 Glenn Hill Dr. Alexander, AR 72002			Schedule E/F, line	4.8
	Alexander, Alt 72002			Schedule G pital One	
3.3	Blind Pro, Inc.			Schedule D, line	
	335 Glenn Hill Dr. Alexander, AR 72002			Schedule E/F, line	4.30
	AIGAGIUGI, AN 12002			Schedule G aples	

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Additional Page to List More Codebtors Column 1: Your codebtor Column 2: The creditor to whom you owe the debt. Check all schedules that apply:	Debtor 1	Monty Kirk Wilson Loria Lynn Wilson	Case number (if known)
Column 1: Your codebtor			
Schedule D, line			
Schedule EF, line 4.14		Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
Schedule EF, line 4.14	3.4	Blind Pro, Inc.	☐ Schedule D, line
Schedule D, line			
Schedule D, line		Alexander, AR 72002	☐ Schedule G
Schedule Fr, line 4.38 Schedule Fr, line 4.38 Schedule G Vista Products			Exxon Mobil
Schedule Fr, line 4.38 Schedule Fr, line 4.38 Schedule G Vista Products			
Alexander, AR 72002 Schedule C Schedule C Schedule C	3.5		
Schedule D, line Schedule D, line Schedule E/F, line 4.34 Schedule E/F, line 4.34 Schedule E/F, line 4.34 Schedule G Timber Blind-Metro Shade		Neverth restriction of the control o	
Schedule D, line		/ Hoxamaon, / H. Y. 2002	
Schedule E/F, line 4.34 Schedule G Timber Blind-Metro Shade			vista Products
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Schedule G Timber Blind-Metro Shade	0.0		
3.7 Blind Pro, Inc. Schedule D, line Schedule E/F, line 4.17 Schedule G Hunter Douglas Fabrication		Alexander, AR 72002	
Schedule E/F, line 4.17 Schedule G Hunter Douglas Fabrication			
Schedule E/F, line 4.17 Schedule E/F, line 4.17 Schedule G Hunter Douglas Fabrication			
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Hunter Douglas Fabrication 3.8 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002 Blind Pro, Inc. 335 Glenn Hill Dr. Alexander, AR 72002		Alexander, AR 72002	
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Alexander, AR 72002 Schedule G Springs Window Fashions Schedule D, line 4.28 Schedule G Schedule E/F, line 4.28 Schedule G Skandia Window Fashions Schedule D, line 5.20 Schedule G Skandia Window Fashions Schedule D, line 4.1 Schedule E/F, line 4.1 Schedule G Schedule E/F, line 4.1 Schedule G Schedule G Schedule E/F, line 4.2 Schedule G S	3.8		
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335 Glenn Hill Dr. Alexander, AR 72002 ■ Schedule E/F, line 4.2 □ Schedule G			Acces a member benefit
335 Glenn Hill Dr. Alexander, AR 72002 ■ Schedule E/F, line 4.2 □ Schedule G	3.11	Blind Pro, Inc.	☐ Schedule D, line
Alexander, AR 72002		335 Glenn Hill Dr.	
AT&T		Alexander, AR 72002	
			AT&T

Fill	in this information to identify your o	case:								
Del	btor 1 Monty Kirk	Wilson								
Section Control	btor 2 Loria Lynn	Wilson								
Uni	ited States Bankruptcy Court for the	e: EASTERN DISTRICT	OF ARK	ANSAS						
100000000000000000000000000000000000000	se number nown)		-					nded filin ement sh	g owing postpetitio the following date	
0	fficial Form 106I							O/ YYYY		•
S	chedule I: Your Inc	ome					IVIIVI / DI	7/ 1 1 1 1		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. T1: Describe Employment Fill in your employment	are married and not filing wing spouse is not filing wing the top of any additi	ng jointly ith you, c onal pag	/, and your s do not includ les, write you	pouse i le infori	is liv matio	ing with you, i on about your I case number	nclude ir spouse. (if know	nformation abou If more space is n). Answer ever	it your needed, y question.
	information.		Debtor 1			Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed			■ Employed□ Not employed				
	employers.	Occupation	Seasonal Sales			Casl	ier			
	Include part-time, seasonal, or self-employed work.	Employer's name	Lowe's Home Improvement			t Walr	Walmart			
	Occupation may include student or homemaker, if it applies.	Employer's address		N. Reynold nt, AR 72022			400 Bryant Ave. Bryant, AR 72022			
		How long employed the	here?	18 days				6 days	s	
Par	t 2: Give Details About Mo	nthly Income								
Esti i spou	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have	nothing to re	port for	any l	ine, write \$0 in	the space	e. Include your no	on-filing
If yo	u or your non-filing spouse have m e space, attach a separate sheet to	ore than one employer, co	ombine th	e information	for all e	emplo	yers for that pe	rson on t	the lines below. If	you need
							For Debtor 1		r Debtor 2 or n-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	632.1	3 \$_	0.00	<u> </u>
3.	Estimate and list monthly overt	ime pay.			3.	+\$	0.0	<u>0</u> +\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.			4.	\$	632.13	\$	0.00	

Deb Deb	tor 1 tor 2	Monty Kirk Wils Loria Lynn Wils				Cas	e number (if known)				
						F	or Debtor 1		or Debtor		
	Cop	y line 4 here			4.	\$	632.13	\$		0.00	
5.	l iet	all payroll deduct	ions:								
0.				datiawa	Ea	ď	54.50	r.		0.00	
	5a. 5b.		and Social Security ded ributions for retiremen		5a. 5b.	\$	51.59	\$ \$		0.00	
	5c.	·#0	ibutions for retirement		5c.	\$	0.00	\$		0.00	
	5d.		ments of retirement fur		5d.	\$	0.00	\$		0.00	
	5e.	Insurance	ments of retirement ful	ild loans	5a. 5e.	\$	0.00	\$	-	0.00	
	5f.	Domestic suppo	ort obligations		5f.	\$	0.00	\$		0.00	
	5g.	Union dues	ort obligations		5g.	\$	0.00	\$		0.00	
	5h.	Other deduction	s. Specify:		5h	٠,	0.00			0.00	
6.	Add		tions. Add lines 5a+5b	+5c+5d+5e+5f+5a+5h.	6.	\$	51.59	\$		0.00	
7.			ly take-home pay. Sub		7.	\$	580.54	\$		0.00	
8.		all other income r Net income from profession, or fa Attach a stateme receipts, ordinary monthly net inco Interest and div Family support regularly receive Include alimony, settlement, and p Unemployment Social Security Other governme Include cash ass that you receive,	regularly received: in rental property and from int for each property and int and necessary busines ine. idends payments that you, a re espousal support, child so property settlement. compensation ent assistance that you istance and the value (if such as food stamps (b	rom operating a business, business showing gross is expenses, and the total con-filing spouse, or a depo- upport, maintenance, divorce regularly receive known) of any non-cash ass enefits under the Supplement	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$		0.00 0.00 0.00 0.00 0.00	
		Specify: VA E	nce Program) or housing Renefit	subsidies.	8f.	\$	136.00	\$		0.00	
	8g.	Pension or retir			8g.	\$	0.00	\$		0.00	
	8h.	Other monthly i	ncome. Specify:			+ \$	0.00	+ \$		0.00	
						_					P
9.	Add	all other income.	Add lines 8a+8b+8c+8	d+8e+8f+8g+8h.	9.	\$_	136.00	\$		0.00	
10.	Cald	culate monthly inc	ome. Add line 7 + line 9	9.	10.	3	716.54 + \$		0.00	= \$	716.54
	Add	the entries in line 1	0 for Debtor 1 and Debt	or 2 or non-filing spouse.		8					
11.	Inclu othe	ude contributions from triends or relative not include any amo	om an unmarried partne s.	xpenses that you list in Sc. r, members of your househol n lines 2-10 or amounts that a	ld, your deper						0.00
12.		e that amount on th		to the amount in line 11. as and Statistical Summary o						\$	716.54
13	Dos	ou expect an incr	ease or decrease with	in the year after you file thi	is form?					Combine	
, 5.		No.	Case of acorease with	ale year alter you me till	1011111						
		Yes. Explain:	Loria Wilson begin hours per week at 9	s training as a cashier a \$11 per hour.	t Walmart	on 0	2/22/19. She w	ill w	ork betw	veen 10-3	38

Fill i	n this informa	ation to identify yo	our case:		20 10 20 20					
Debt						Ck	neck if thi	ic ic:		
Debi	tor i	Monty Kirk V	viison					nended filing		
Debt (Spo	tor 2 ouse, if filing)	Loria Lynn V	Vilson	***************************************		A supplement showing postpetition chapter 13 expenses as of the following date:				
Unite	ed States Bankı	ruptcy Court for the	EASTE	RN DISTRICT OF ARKAN	SAS		MM /	DD / YYYY		
5.000.000	e number nown)									
Of	ficial Fo	rm 106J								
Sc	chedule	J: Your	Exper	ises						12/15
Be a	as complete ormation. If m nber (if know	and accurate as nore space is ne n). Answer eve	s possible. eded, atta ry question	If two married people arch another sheet to this	e filing together, be form. On the top of	oth are ed any add	qually re itional p	sponsible fo ages, write y	r supplying corre our name and cas	ct se
Part 1.	t 1: Desci	ribe Your House	hold							
1.	□ No. Go to									
		es Debtor 2 live	in a separ	ate household?					*	
	■ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of D	ebtor 2.			
2.	Do you hav	e dependents?	■ No							
۷.	to the second	29 1 07 02	1000000	Fill and this information for	Daniel and and a select	osolete re	ъ.	1 4	D	
	Do not list D Debtor 2.	eptor i and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		ag	ependent's le	Does dependent live with you?	i
	Do not state	the							□ No	ı
	dependents	names.			<u> </u>				☐ Yes	
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3.	Do your ex	oenses include							☐ Yes	
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exp	imate your ex enses as of a licable date.	xpenses as of your age of your age of the l	our bankru bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this fo lemental <i>Schedule</i>	orm as a <i>J</i> , check	supplent the box	nent in a Cha	pter 13 case to re the form and fill	port in the
Incl	ude expense	s paid for with	non-cash	government assistance if	you know					
the	value of sucl	h assistance an		luded it on Schedule I: Y				Your expe	neae	
(Off	icial Form 10)6I.)					WWW.	Tour expe	ilises	
4.		or home owners		ses for your residence. In r lot.	nclude first mortgage	4.	\$		1,353.39	
	If not includ	ded in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
		erty, homeowner's	s, or renter'	s insurance		4b.	-		0.00	
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				Explain here:			

Fill in this	s information to identify your case:							
Debtor 1	Monty Kirk Wilson First Name Middle Name	Last Name						
Debtor 2 (Spouse if, fil	Loria Lynn Wilson	Last Name						
United States Bankruptcy Court for the: EASTERN DISTRICT OF ARKANSAS								
Case num	nber	☐ Check if this is an amended filing						
Official	Form 106Dec							
Decla	aration About an Individual De	btor's Schedules 12/15						
If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.								
	Sign Below							
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	No							
	Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)							
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X Monty Kirk Wilson Signature of Debtor 1 Date Date								
N S	/lonty Kirk Wilson Signature of Debtor 1	Loria Lynn Wilson Signature of Debtor 2						
С	Date 2-28-19	Date 02/38/2019						